PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

10/030356

Parione	(202)	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
	TO	TAL CLAIMS						F	RATE	FEE) 	RATE	FEE		
	FOR	R		NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE		OR	BASIC FEE	890		
	TOT	TAL CHARGEABLE CLAIMS		29 minus 20=		• 9		\[\frac{1}{2}\]	(\$ 9=		OR	X\$18=	162		
l	INDEPENDENT CLAIMS 5 minus 3 =				nus 3 =	2		\[\bar{\}\]	(42=	-	OR	X84=	168		
	MULTIPLE DEPENDENT CLAIM PRESENT				• •	·.		1	140=		OR	+280=			
	* If 1	he difference i	in column 1 is i	less than ze	ss than zero, enter "0" in column 2			T	OTAL		OR	TOTAL			
	CLAIMS AS AMENDED - PAR Column 1) (Colum					mn 2)	(Column 3)	s	MALL E	NTITY	OR	OTHER SMALL E			
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	: ::	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
or the sound			· 99	Minus	* 6	79	= -		(\$ 9=		OR	X\$18=			
	AME	Independent FIRST PRESE	* 5 NTATION OF MI	Minus	*** 2	TCLAIM		>	(42=		OR	X84=			
					·	·		+	140=		OR	+280=			
	30-30	5/26/05	(Column 2)			(Column 3)	ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE				
Translation of the Country of the Co	AMENDMENT B	V.	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
		Total	. 29	Minus	** 9	19	=	\ \[\	(\$ 9=		OR	X\$18=			
		Independent	* 5 NTATION OF MI	Minus	***	5 CLAIM	= /	;	(42 =		OR	X84=			
		THOTFHESE		OCTIFUE DEF	ENDEN	CLAIN		'	140=	•	OR	+280=			
								AD(TOTAL DIT. FEE	-	OR	TOTAL ADDIT. FEE			
,	_		(Column 1)	٠.		mn 2)	(Column 3)					. • •			
11:21 OFFE 14929	AMENDMENT C	1	REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT - EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIQNAL FEE		
		Total	4	Minus	**		=	[>	(\$ 9=	•	OR	X\$18=			
000		Independent	"	Minus	***	T CL AINA	=		(42= [°]		OR	X84=			
4,118									140=		OR	+280=			
		* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL ADDIT. FEE	· · ·		
•		The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ADDIT. FEE													